

## Section 2- Improving School Asthma Management

*This is a collaborative report coauthored by the Evaluation Team at Group Health Community Foundation, with others involved in the process, including: the AAA Project Director, Co-Director, and Project Manager/KCAF Coordinator.*

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### Summary

KCAF activities focused on improving school asthma management included Team Asthma Goes to School (TAGS), a program designed to raise asthma awareness and support staff and parents in resolving asthma concerns, the Tools for Schools indoor air quality assessment program, and coordination of other asthma activities in schools. The KCAF Schools Committee provided the oversight, direction and coordination for the KCAF's school-based activities.

Key accomplishments of the school-based efforts included:

- **Developing the TAGS model and a triage system.** KCAF staff utilized a participatory approach to develop the consultative model for working with schools. Through the development of TAGS, agencies and organizations in King County offered their asthma expertise to any school personnel or parents who called in for asthma-related assistance. Through TAGS, a triaging system that connected these agencies and individuals to community members was developed that allowed one centralized office to take and disperse requests for services/assistance. For example, TAGS offered links to an indoor air quality program offered by Public Health-Seattle & King County, researchers from the University of Washington, the American Lung Association of Washington, the Allergy and Asthma Foundation of Washington, and several asthma clinicians. These linkages were easily made by the fact that all organizations were already part of KCAF.
- **Sponsoring asthma presentations for parents and school staff/administrators.** Upon request, TAGS connected both parents and school staff with local health care providers who offered basic asthma education. In addition, schools requested booths at school health and wellness fairs, one school nurse called for assistance with a home environmental assessment, and one school district requested information about mold.
- **Conducting Tools for Schools indoor air quality assessments,** which resulted in a number of districts that have indoor air quality plans.
- **Obtaining funding to sustain coordination of the Neighborhood Asthma Committees** (now called Neighborhood Health Advocacy Committees), from the Steps to Health-King County program.
- **Offering three continuing education/in-service training courses** targeting teachers, family support workers, health educators, and Seattle school nurses. The courses

highlighted environmental and medical aspects of asthma, key messages and use of action plans, described roles personnel play, and described the KCAF/TAGS triage service. Updates were also provided to school nurses on the NAEPP guidelines.

- **Creating a media package to raise awareness of school-related asthma issues.** The Schools Committee, with the assistance of a public relations specialist at PHSKC, developed a media package to raise awareness about asthma in general and the specific challenges that face schools in managing children with asthma. The public relations specialist submitted the package to local newspapers.
- **Distributing posters and fliers** within schools and school-based health clinics communicating the services offered by the KCAF. (*NOTE – add link to most current KCAF flier*) As a result of directly mailing fliers about KCAF programs to all elementary and middle school students' homes, many caregivers called the phone triage line (please see section 6 for more detail) to enroll in the AAA CHW intervention and other KCAF programs.
- **Distributing the AMES Manual.** KCAF has distributed “Asthma Management Education in the Schools” (AMES) manuals to all school nurses in the AAA area. The manual provides detailed information for school administrators on how to create schools that are environmentally healthy and policies that promote effective management of childhood asthma. The manual includes a checklist for improvements and walks administrators step by step through each recommendation. The American Lung Association of Washington, a member of the KCAF, distributes this manual. The manual is available on the ALA website ([http://www.alaw.org/childhood\\_asthma/ames/](http://www.alaw.org/childhood_asthma/ames/)).
- **Commissioning and presenting an asthma play** to middle school students at three schools within the AAA target area. Students performed the play, which tried to dispel stigmas sometimes associated with asthma.

## Background

Asthma accounts for over 10 million missed school days per year nationwide. Schools struggle both with creating an environment that minimizes asthma triggers and with the day-to-day management of students with asthma. In King County, those challenges are heightened by an environment of shrinking budgets, an inadequate number of school nurses, and pressure on staff to focus on academic activities that directly improve test scores, leaving little time for other activities. Most school personnel have not received training in reducing environmental asthma triggers or in responding to asthma exacerbations. Few students have asthma management plans on-site. School nurses and medical providers in the community describe difficulties in exchanging information.

## Description of School-Based Activities

The initial focus of KCAF school-based activities was on developing Team Asthma Goes to School (TAGS), a program designed to raise asthma awareness and support school staff and parents in resolving asthma concerns. Additional less intensive activities included supporting Tools for Schools assessments in AAA-area schools, producing an asthma play for middle school students, and developing training and other educational activities for personnel and students. The Schools Committee provided the oversight, direction and coordination for the KCAF's school-based activities.

**TAGS.** TAGS was a consultative model designed to connect school personnel and families with information, experts, programs, and curricula that could help with the clinical and environmental aspects of asthma management. TAGS was staffed by the KCAF Outreach Coordinator, who received guidance and support from the Schools Committee chair. The AAA Outreach Coordinator responded to calls from school personnel or caregivers of students and helped them access appropriate services or information, most of which KCAF members provided on a voluntary basis. Examples of the types of calls that were made to TAGS were to request asthma presentations for staff, to get help to address indoor air quality concerns, or to link a student with services.

During the summer of 2003, AAA provided school nurses (including those in school-based teen health clinics) in the Highline, Tukwila, Renton and Seattle districts with an overview of TAGS and a packet of information with contact information and several examples of how TAGS services can be useful. Later that year, school district budget cuts resulted in school nurse FTE reductions, which shifted more health responsibilities to non-nursing staff. AAA began promoting TAGS to other school personnel, including health educators, family support workers and teachers. AAA staff and Schools Committee members organized two full-day in-service trainings—one for teachers and another for health educators and family support workers. (***NOTE - add links to school teacher in-service training flyer and FSW training flyer***). In addition, they held an in-service training for Seattle Public School nurses (***Note - link to program flyer***). Those

trainings included information about asthma pathophysiology, environmental and medical aspects of asthma, key asthma messages and use of action plans, the role of school personnel in asthma management, and how to refer students to KCAF members' programs.

**Recruitment to KCAF programs.** In the fall of 2003 AAA staff worked with the school districts to send fliers announcing KCAF programs to all elementary and middle school students' homes in the AAA area. Nearly 20,000 flyers were sent. As a result, many caregivers with children in the AAA-area schools called the triage line to enroll in the AAA CHW intervention and other KCAF partnering programs.

### **Tools for Schools.**

Public Health-Seattle & King County administers the local Tools for Schools (TFS) indoor air quality program developed by the US Environmental Protection Agency. Information about Tools for Schools can be found at <http://www.epa.gov/iaq/schools/>. The TFS coordinator was an active participant in the Schools Committee and coordinated his work closely with the committee. He conducted fifty TFS assessments from January 2003 through June 2005 in the AAA target area. Following the recommendation of the Schools Committee, the TFS program began providing follow-up visits to schools to ensure staff have access to support and training related to any issues identified in the assessment.

Eight follow-up visits occurred in May 2005. Some of the most common challenges observed at these were: elementary school still had problems with upholstered furniture, blankets and area rugs, and educational supplies provided by the school district or teachers which decrease indoor air quality were still present.

### **Asthma Play.**

In response to recommendations that emerged from the AAA assessment phase, the KCAF partnered with the Rainier Valley Youth Theater to commission an asthma play for middle school students. The play, called *Chicken Soup*, tried to dispel the stigma that students may associate with asthma and emphasized the importance of taking action to control asthma. It was performed in three schools in the AAA target area with over 500 attending.

### **Linkage with Neighborhood Asthma Committees (NACs).**

Because many of the NACs met in schools, NACs and the schools shared information and sometimes resources. In anticipation of AAA funding for NACs coming to an end in the fall of 2004, the Schools Committee developed a proposal to Steps to Health- King County to sustain the NACs. The grant was awarded (see Section 5 for more details).

**Current Status.** The Schools Committee intends to sustain itself after RWJF funding, although it does not have a concrete plan for how it will do so. Steps to Health- King County brought momentum, resources, and new participants to the Schools Committee and helped form new opportunities to coordinate services with other organizations. For example, through Steps, three schools conducted the asthma module of the School Health

Index assessment, and have developed action plans that resulted in the Schools Committee providing follow up (e.g. one ACT class was held at a school and committee members made a presentation at a school about resources for families). Many of the programs that have been participating in the committee are struggling with funding issues (i.e., there is currently no more funding for TFS), and their ongoing participation is uncertain. The school districts have requested assistance from the KCAF for responding to new legislation that allows students to ‘self-carry’ their medications. Because of the complex nature of applying this law to school systems, the schools committee could provide a valuable role in advising on compliance with this law.

### Measuring Progress in School-Based Activities

The primary progress indicators for the AAA schools intervention are the number and type of consultation, training and other activities offered to school personnel, parents, and students:

#### TAGS Activities

TAGS activities included:

- 13 requests for assistance from school personnel (from TAGS log- as of May 2004).
- 2 presentations made to parents and personnel, and 5 referrals made to Community Health Workers, Tools for Schools.
- A full-day continuing education class was held for teachers – 17 attendees.
- A full-day continuing education class was held for health educators and family support workers – 17 attendees.
- A resource workshop for Seattle Public School nurses – 60 attendees.

#### Tools for Schools

- Between January 2003 and June 2005, the TFS coordinator from Public Health-Seattle & King County conducted 50 Tools for Schools indoor air quality assessments (8 funded by AAA) in the AAA target area: 39 in elementary schools, 8 in middle schools, 3 in high schools.

#### AMES Manuals

- Manuals were distributed to all school nurses within AAA target area.
- AMES manual now available on-line and no longer possible to track dissemination.

#### Other School-Based Activities

- KCAF posters and fliers were developed and disseminated throughout schools to recruit students with asthma to KCAF programs.
- In Fall of 2003, 20,000 fliers were directly mailed to the homes of elementary and middle school students of AAA area schools, leading to many calls from caregivers to the phone triage line (see section 6 for more details).
- An asthma play addressing the stigma students may associate with asthma and the importance of using medications was commissioned and then performed in three middle schools – 500 students attended.

- A full-day training was held for members of the Washington Education Association. This resulted in the American Lung Association’s development of a teacher training CD-Rom (available through AMES).
- Developed a proposal to Steps to Health – King County and obtained funding to sustain the NACs.

### **Schools Committee - Benefits and Success Factors**

The Evaluation Coordinator conducted a group interview of the Schools Committee at a meeting in May 2005, asking about the benefits of the schools program and success factors most responsible.

**Benefits of participating in the Schools Committee** included relationship building and information exchange:

*Regular contact with people to build relationships. It helps knowing there’s a regularly scheduled time you’re going to see people.*

*Just knowing we’ll be seeing each other reinforces relationships. It’s important for information exchange. [Name deleted] brings a statewide perspective. We bring new resources from our individual organizations. Physical contact keeps momentum going and sustains trust.*

*Meeting regularly gets you thinking about partnerships. It triggers ideas. Helps me figure out if there’s something I could do. Creates a foundation for me.*

*King County is a big mess of individuals and agencies. This committee is another space for people to discuss asthma. It’s a different culture; different things are talked about here than in other forums.*

**Success factors** identified by Schools Committee participants included a willingness to take responsibility on the part of members and resources from AAA to staff the committee:

*Willingness for people to take responsibility for action. People took leads writing proposals for example.*

*AAA money allowed coordination of this committee, brought loyalty to the committee, helped keep us on track.*

### **Lessons Learned**

KCAF learned several lessons in the process of implementing the AAA schools intervention that may be useful for other school-based efforts in the future. Lessons include:

- **Adopt a flexible approach to outreach and training.** The initial TAGS strategy was to target school nurses for outreach and education. However, the Seattle Public School District eliminated several nursing positions in 2004 requiring a change in school outreach strategy. The Schools Committee began considering other audiences with whom to proactively promote TAGS such as parents, administrators, families, physical educators, and health instructors. The Schools Committee developed two continuing education classes for teachers, health educators, and family support workers as a way to reach out to school personnel other than nurses. Ultimately, the Schools Committee chose to allocate resources to other strategies because in general, TAGS was not being used.
- **Offer a range of program options to schools.** School personnel are overwhelmed with issues perceived as more pressing than asthma, which limited TAGS utilization. Since its inception, only thirteen requests were made for TAGS services. Changing how TAGS was promoted and expanding existing services was one way that use was encouraged. The Schools Committee adopted Tools for Schools as one additional service that was easier to implement.
- **Launch a pilot program to assess the best strategy.** Resource limitations made it difficult to develop a more proactive schools intervention that would have greater impact than the existing consultative model. Some stakeholders believed it would have been useful to have a full-time staff person dedicated to school asthma activities. With limited resources for TAGS staffing, expansion, and making improvements, launching a pilot program to better assess school needs and sustainable implementation strategies could be useful.
- **Assess how the political viability of the schools environment affects intervention feasibility.** The Schools Committee learned along the way that health topics in school settings are political. To the extent possible, it could be helpful to try to anticipate different positions of different interest groups, and then assess and document divergent views. As in any setting, politics is one dimension to inform intervention methods and strategies.
- **Be attentive to the academic calendar, testing schedules, and student survey schedules,** and coordinate around these school priorities.